

EVANSTON NORTHWESTERN HEALTHCARE

Progress Notes

All notes  
 Author Steven Mottl Service (none) Author Type Resident Filed 01/17/2008 1937

Resident History and Physical Examination

1/17/2008

Berenice Ventreila 88YO female xxx-xx-7386 Attg: Wahl, Michael S.

CC: infection

HPI: (hx per chart, pt unable to provide)

88YO female with history of MMP including dementia, CAD and DM that presents by EMS to GB ED after son notified paramedics of possible infection in his mother. Pt lives at home with husband who is primary care giver for her and disabled son. He has been in the hospital and the son has been taking care of her. Tonight she was found soiled in her feces and covered in urine. In ED pt was found to be hypotensive and hypothermic and placed in bear hugger and given liter of warm saline. A foley was placed with cloudy urine returned, she was treated empirically for UTI with dose of levaquin. Pt is delirious, but is able to answer some question appropriately, does not have any complaints.

ROS: pt denies all, ?validity of answer

Gen: -fever, -chills, -weakness, -fatigue, -decreased activity

Neuro: -headache, -occasional dizzy, -foot numbness and tingling, -slurred speech, -bowel/bladder dysfunction, -visual loss

ENT: -sore throat, -discharge, -hearing loss

Eyes: -vision change, -blurriness, -eye pain, -discharge

Skeletal: -cervical pain, -thoracic pain, -lumbar pain, -joint pain

Cardiac: -chest pain, -palpitations, -cold sweats

Resp: -cough, -productive, -dyspnea, -wheezing

GI: -decrease appetite, -abdominal pain, -nausea, -vomiting, -watery diarrhea, -constipation, -melena, -BRBPR

GU: -flank pain, -dysuria, -frequency, -urgency

Skin: -rashes, -edema

Psych: -depression, -anxiety

Endo: -weight loss, -heat intolerance, -cold intolerance

Patient Active Problem List

Diagnosis	Code
• CONGESTIVE HEART FAILURE	428.0
• DIABETES MELLITUS	250
• BENIGN HYPERTENSION	401.1
• CHRONIC ISCHEMIC HEART DISEASE NOS	414.9
• MITRAL/AORTIC STENOSIS	396.0
• Urinary Tract Infection, Site not Specified	599.0
• Hallucinations	780.1
• Urinary Retention	788.20B

Past Medical History

Diagnosis	Date
• Accidental Fall from Bed	2/2/03
• Shortness of Breath	2000
• Unspecified Chronic Ischemic Heart Disease	1999
• Diabetes Mellitus	1990
• ACUTE MYOCARDIAL INFARCT (aka MYOCARDIAL)	4/17/2003
• CONGESTIVE HEART FAILURE	4/17/2003
• BACKACHE NOS (aka BACK PAIN)	5/15/2003

Ex. A

Author Service Author Type Filed  
 Barry Scolnick (none) Social Worker 01/18/2008 1020

Holy Lichtmann LCSW with the North Shore Senior Center has been notified of this pt., potential sr. abuse and the fact that she is in house. when she arrives in the ICU, she needs to be allowed to see this pt. she will then page me and we will discuss all issues.  
 Above reviewed with unit secty. Yogi.

Barry J. Scolnick LCSW

847-657-5778

Pager #7789

Author Service Author Type Filed  
 Marie O'Connell (none) Registered Nurse 01/18/2008 1021

Spoke with the patients listed POA, John, on the phone.

I updated him to condition.

I asked John to call the patient's primary care MD to inquire as to whether she is up to date on pneumovax and flu shot.

Author Service Author Type Filed  
 Steven Mottl (none) Resident 01/18/2008 1109

Resident History and Physical Examination

1/17/2008

Berenice Ventrella 88YO female xxx-xx-7386 Attg: Shapiro, Susan D.

HPI: (hx per chart, pt unable to provide)

88YO female with history of MMP including dementia, ICM (EF 28%) and DM that presents by EMS to GB ED after son notified paramedics of possible infection in his mother. Pt lives at home with husband who is primary care giver for her and disabled son. He has been in the hospital and the son has been taking care of her. Tonight she was found soiled in her feces and covered in urine. In ED pt was found to be hypotensive and hypothermic and placed in bear hugger and given liter of warm saline. A foley was placed with cloudy urine returned, she was treated empirically for UTI with dose of levaquin. Pt is delirious, but is able to answer some question appropriately, does not have any complaints.

ICU Course:

Pt was actively rewarmed with bear hugger and warm saline overnight to appropriate temperature. BP responded to gentle IVF. There were no additional complications. This am pt pleasantly demented and speaking to window. Denies any pain.

Current Active Problem List

Diagnoses	Code
• CONGESTIVE HEART FAILURE	428.0
• DIABETES MELLITUS	250
• BENIGN HYPERTENSION	401.1
• CHR ISCHEMIC HRT DIS NOS	414.9
• MITRAL/AORTIC STENOSIS	396.0
• Urinary Tract Infection, Site not Specified	599.0
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Author Service Author Type Filed

- will cont with levaquin D#2
- pt with 2/4 SIRS, nml lactate
- IVF to maintain UO of 30-40cc/h
- UCx and BCx

3) DM

-ISS

4) HTN/CAD

- will hold meds in setting of HTN
- DIGOX <0.2 01/17/2008 ?still taking

5) Elder Neglect

-social work consult

Proph:

DVT: lovenox

Ulcer: not indicated

D/W Dr. Bellam  
Steven Mottl, DO  
3649

Author Service Author Type Filed  
Sheree B. Lipkis (none) Physician 01/18/2008 1228

1/18/2008

S: Chart and situation reviewed. (I am covering for Dr Susan Shapiro. outpatient chart reveals she has hx of DM, CAD, hypertension, osteoarthritis, S/P vertebral compression fx, fx right humerus, dementia and hallucinations, and has been bedridden since March 07 after foot fractures.) Past Surg hx: right humerus repair (after fall 2003), catarracts, and partial hysterectomy (ovaries remain)

Pt answers all questions but not always with relevant answers. She denies any complaints now including chest pain, SOB, urine problems, or pain.

She was brought to ER yesterday afternoon after allegedly lying in feces and old urine. Reportedly she is cared for at home by her son and husband but her husband as recently hospitalized at Glenbrook Hospital. She was found to have a urine infection, possible pneumonia and hypothermia and was admitted to ICU. I asked her if, if her heart were to stop would she want to be resuscitated and she said "NO"

O: